

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/909,014	
	Filing Date	7-20-2001	
	First Named Inventor	E. S. KEMENY	
	Group Art Unit	1761	
	Examiner Name		
Total Number of Pages in This Submission	6	Attorney Docket Number	

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply PRE-EXAM	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Re-submission	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	EMANUEL S. KEMENY
Signature	<i>Emanuel S. Kemeny</i>
Date	3-3-02

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <input type="text"/>		
Typed or printed name		
Signature		Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

TO: USPTO
Assistant Commissioner for Patents
Group Director/Art Unit 1761

In re Application of
Emanuel S. Kemeny
Serial No. 09/909,014
Meal Equivalent Food Bar
Filed 7/20/2001

Pre-Amend C
03-04-02
OW
RECEIVED
MAR - 4 2002
TECHNOLOGY CENTER 1700
11

SECOND AMENDMENT BEFORE FIRST ACTION

Re-submitted (03-03-02) in response to Notice of
Non-Compliant Amendment (37CFR1.1.121) paper No.10.

Please enter the amendments as shown on the following pages.

Note:

No new matter is entered in the amendments:

1. Spelling corrections in the specification and claims
2. New paragraphs referencing the Information Disclosure
Statement patents filed 02-05-02

No fee is required for the amendment.

Emanuel S. Kemeny
Emanuel S. Kemeny
Applicant
3-3-02